

NORTHERN VIRGINIA REGIONAL PARTNERSHIP

(Recent changes are underlined)

VISION

Development of a cost-effective, comprehensive, culturally competent array of recovery-oriented, consumer choice driven integrated services that are flexible and accessible to consumers and oriented toward proactive care, maintaining stability, and maximizing independence and community integration. Education must be intensified to combat and overcome discrimination historically associated with mental illness.

GUIDING PRINCIPLES AND OBJECTIVES

Five Guiding Principles

1. Ensure Quality Services

- Education should be available on how to access services
- Consumers and caregivers should be educated about how to get the most benefit from the services they receive
- Sufficient capacity should exist throughout the system
- Treatment and services should be available for Northern Virginians within the region
- Outcomes should focus on recovery, quality of life, sufficiency and well being
- A proactive model that avoids crises, both for individuals and the providers, should be achieved
- Services should be based on best practice models and evidence-based research
- Services should be culturally competent
- Services should address the co-occurrence of behavioral and medical problems
- Services should be guided by the principles of the Recovery Model, and education should be provided for self-management, self-advocacy and achieving wellness

2. Ensure Consumer And Family Protections Are In Place

- Fully educate consumers regarding their rights, assure compliance with human rights regulations and protect consumers against discrimination
- Fully involve consumers, family members and caregivers in system-wide planning activities and program evaluations and provide them with adequate support when needed.
- Provide support appropriate to those exercising their rights under the Human Rights Regulations or other disability protections.
- Consumers and their families or guardians should be encouraged to communicate their concerns and interests to caregivers in order to fully participate in planning the system of services.
- Consumers, families and caregivers should fully participate in developing treatment plans. They should be able to exercise preference and choice in treatment services.
- Services at all points in the continuum will support self-management and minimize coercive measures; safety of clients and staff is paramount.

- Encourage consumers, families and caregivers to seek out educational resources.

3. Broaden Community Service Options

- Service options for persons with co-occurring mental illness and substance use disorder should be provided through an integrated system
- Continuum of services should include full range of needed services, including acute hospital care and other medical services
- Service options should emphasize community integration, utilize natural support systems, be easily accessible and include an array of employment and housing options
- Service options should also include age appropriate services for youth transitioning to adult services and for older adults
- Service options should include peer support and consumer-operated services

4. Address Work Force Issues

- Strengthen recruitment and retention activities across the entire system including state facilities, CSBs and private providers
- Develop mechanisms that facilitate the ability of staff to transfer to different employers within the system
- Encourage training and employment of consumers as providers

5. Maximize Revenue, Minimize Cost

- Fully utilize private and non-profit service providers to expand capacity and increase choices
- Use cost benefit analysis whenever appropriate in planning system change
- Balance accessibility and cost in Regional Program Planning
- Pursue simplification of funding streams and elimination of unnecessary barriers to eligibility
- Maximize Medicaid funding by enrolling consumers in Medicaid, encouraging providers to become Medicaid vendors and matching consumers to providers of Medicaid services